

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

Amnt 5-4-04

SERIAL NO.

09358177

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5						
6		1				
7		1				
8	1					
9		1				
10		1				
11		1				
12		1				
13		1				
14	1					
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49						
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS	235	235	235	235	235	235

	IND	DEP	IND	DEP	IND	DEP
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS	235	235	235	235	235	235